AMENDED IN ASSEMBLY SEPTEMBER 2, 2005

AMENDED IN ASSEMBLY AUGUST 30, 2005

AMENDED IN SENATE MAY 27, 2005

AMENDED IN SENATE APRIL 27, 2005

AMENDED IN SENATE MARCH 29, 2005

SENATE BILL

No. 600

# Introduced by Senators Ortiz and Perata (Coauthors: Senators Alquist, Kuehl, and Romero)

(Coauthors: Assembly Members Chan, Koretz, and Pavley)

February 18, 2005

An act to add Chapter 8 (commencing with Section 105440) to Part 5 of Division 103 of the Health and Safety Code, relating to public health.

#### LEGISLATIVE COUNSEL'S DIGEST

SB 600, as amended, Ortiz. Biomonitoring.

Existing law establishes various programs for the protection of the public from exposure to toxins, including, but not limited to, the Childhood Lead Poisoning Prevention Act, administered by the State Department of Health Services, which imposes a fee upon manufacturers or persons who are responsible for lead contamination and applies the proceeds of the fee to reduction or elimination of the harm caused by the lead contamination.

This bill would require the Division of Environmental and Occupational Disease Control within the department to establish the Healthy Californians Biomonitoring Program to monitor the presence and concentration of designated chemicals, as defined, in Californians.

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This bill would require the department and the agency to establish an advisory panel to assist the department and the agency. The bill would establish the Healthy Californians Biomonitoring Fund for deposit of funds, for expenditure by the department and agency upon appropriation by the Legislature, for the biomonitoring program. The bill would require the department to provide public access to information, and to report to the Legislature and the public.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. The Legislature finds and declares all of the 2 following:

- (a) Chronic disease has reached epidemic proportions in the United States. An estimated 125 million Americans, or 43 percent of the population, have at least one chronic illness, while 60 million people, or 21 percent of the population, suffer from multiple chronic conditions. Roughly 20 million American children suffer from at least one chronic health problem. Cancer, asthma, birth defects, developmental disabilities, endometriosis, and infertility, are becoming increasingly common, and mounting evidence links incidence and severity of these diseases to exposure to environmental toxicants.
- (b) Chronic diseases carry enormous costs to California. For example, the estimated total cost of asthma in California is approximately \$1.27 billion annually. For individuals born in 1988 with one or more of the 18 most common birth defects, estimated lifetime costs for medical treatment and lost productivity exceed \$1 trillion. Special education for the estimated 1 million California children with learning disabilities, carries an annual price tag of \$12 billion.
- (c) An estimated 85,000 chemicals are registered for use today in the United States. Another 2,000 chemicals are added each year. Some toxicological screening data exists for only 7 percent of these chemicals. More than 90 percent of these chemicals have never been tested for their effects on human health. Large numbers of these chemicals are found in cosmetics, personal care products, pesticides, food dyes, cleaning products, fuels, and plastics. Because of their ubiquity in modern life, Californians

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are commonly exposed to multiple chemicals every day. Many of these chemicals persist in the environment, and accumulate and remain in body fat, and have been shown to be toxic.

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- (d) Biomonitoring studies have scientifically demonstrated that human exposure to a multitude of persistent chemicals is both chronic and widespread. The Centers for Disease Control and Prevention has documented the presence of 148 environmental chemicals in the blood and urine of Americans of all ages and races.
- (e) The presence of toxins in the environment raises special health concerns for California families. The developing fetus is at heightened risk from in utero exposure to harmful chemicals because the neurological, reproductive, and immunological systems of a fetus are still in development. For the same reason, nursing infants are vulnerable because certain persistent toxic chemicals concentrate in body fat and can be transmitted to infants through human milk. It is important to always emphasize that studies conducted on breastfeeding consistently find that human milk is the best choice for maximizing a healthy start in life for infants. There is broad consensus among experts, including, but not limited to, the American Academy of Pediatrics, the American College of Obstetricians, and Gynecologists, the American Academy of Family Physicians, the Academy of Breastfeeding Medicine, the American College of Nurse Midwives, the American Public Health Association, the National Medical Association, the World Health Organization, UNICEF, and the United States Department of Health Services, that mother's milk provides a nursing infant with a stronger immune system, protects the child from illnesses and allergies, provides vital nutrients during critical periods of growth and development, and offers other potential protections against environmental pollutants and pathogens. Therefore, breastfeeding should continue to be promoted as the best infant feeding choice.
- (f) Biomonitoring data supports public health by establishing trends in chemical exposures, validating modeling and survey methods, supporting epidemiological studies, identifying impacted communities or particularly vulnerable communities, assisting in health responses to unanticipated emergency exposures, assessing the effectiveness of current regulations, and helping to set priorities for reform.

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(g) The priority public policy recommendation from the 2002 International Summit on Breast Cancer and the Environment was to establish a national biomonitoring program in the United States.

- (h) In September 2001, the Legislature passed Senate Bill 702 (Chapter 538, Statutes of 2001), making California the first state in the nation to begin planning a statewide environmental health tracking network for chronic diseases and environmental hazards and exposures. In followup, the Senate Bill 702 Expert Working Group has recommended the establishment of a statewide biomonitoring program.
- (i) The Legislature, therefore, finds and declares that the establishment of a statewide biomonitoring program is necessary to identify the presence of toxic chemicals in individuals and communities, to educate and counsel affected individuals and communities, and to develop strategies to prevent exposures to potentially harmful chemicals. A biomonitoring program will expand biomedical, epidemiological, and behavioral public health research. California, an established leader in health promotion, health policy, and health care delivery and response, should encourage and fund this research, which will contribute to the health and well-being of millions of people.
- SEC. 2. Chapter 8 (commencing with Section 105440) is added to Part 5 of Division 103 of the Health and Safety Code, to read:

## Chapter 8. Healthy Californians Biomonitoring Program

#### Article 1. General

105440. (a) This chapter shall be known, and may be cited, as the Healthy Californians Biomonitoring Program.

- (b) For the purposes of this chapter, the following terms have the following meanings:
- 36 (1) "Department" means the State Department of Health 37 Services.
- 38 (2) "Agency" means the California Environmental Protection 39 Agency.
  - (3) "Director" means the Director of Health Services.

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(4) "Secretary" means the Secretary for Environmental Protection.

- (5) "Division" means the Division of Environmental and Occupational Disease Control within the department.
- (6) "Office" means the Office of Environmental Health Hazard Assessment within the agency.
- (7) "Biomonitoring" means the process by which the presence and concentration of toxic chemicals and their metabolites are identified within a biospecimen as a means to assess the chemical body burden.
- (8) "Biospecimen" means a sample taken from a biophysical substance, that is reasonably available within a human body, for use as a medium to measure the presence and concentration of toxic chemicals. "Biophysical substance" includes, but is not limited to, blood, bone, cord blood, fat, hair, human milk, meconium, saliva, and urine.
- (9) "Panel" means the Healthy Californians Biomonitoring Program Advisory Panel established pursuant to Article 2 (commencing with Section 105448).
- (10) "Community" means geographically or nongeographically based populations that may participate in the biomonitoring program. A "nongeographical community" includes, but is not limited to, populations that may share a common chemical exposure through similar occupations, populations experiencing a common health outcome that may be linked to chemical exposures, or populations that may experience similar chemical exposures because of comparable consumption, lifestyle, or product preferences.
- (11) "Designated chemicals" means those chemicals that are known to, or strongly suspected of, adversely impacting human health or development, based upon scientific, peer-reviewed animal, human, or in vitro studies.
- 105441. The division in collaboration with the agency shall establish the Healthy Californians Biomonitoring Program. The division is the lead agency for the program unless otherwise specified in this chapter. The program shall utilize biospecimens, as appropriate, to identify toxic chemicals that are present in the bodies of Californians. Biomonitoring shall take place on a strictly voluntary and confidential basis. Results reported pursuant to this chapter shall not disclose individual confidential

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information of participants. Appropriate biospecimens shall be used to monitor and assess the presence and concentration of designated chemicals.

- 105443. (a) All participants shall be evaluated for the presence of designated chemicals as a component of the biomonitoring process. Participants shall receive a consultation, to explain their results. Providers shall receive training in administering the program in an ethical, participatory, and community-based manner.
- (b) Communities selected for biomonitoring shall be reflective of the economic, racial, and ethnic composition of the state. Educational and outreach activities and materials used for program participants and communities shall, to the extent possible, be culturally appropriate and translated as needed.
- 105444. (a) The department shall adopt guidelines and model protocols that address the science and practice of biomonitoring to implement this chapter that accomplish all of the following:
- (1) Ensure confidentiality and informed consent, and communicate findings to participants, communities, and the general public.
- (2) Emphasize that all aspects of the program are culturally sensitive.
- (3) Serve as a guide for other biomonitoring programs supported by state funds.
- (4) For biomonitoring using human milk as a biospecimen, work in consultation with the community that is being biomonitored and with the panel to provide guidelines for community education regarding the importance of breastfeeding so that the program does not have any unintended and unwarranted negative effects upon a parent's decision whether to breastfeed.
- (5) When exposure data is communicated to the participant during the consultation pursuant to subdivision (a), and when exposure data is publicly released, it shall contain the following statement:

"Biomonitoring is a process by which the presence and concentration of toxic chemicals and their metabolites are identified within a biospecimen as a means to assess an individual's chemical body burden. The measurement of an

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environmental chemical in a biospecimen does not by itself mean that the chemical causes disease. The toxicity of a chemical is related to its dose or concentration in addition to a person's individual susceptibility. Small amounts may be of no health consequence, whereas larger amounts may cause adverse health effects, or the opposite may also be true, depending on the chemical being studied, the concentration of the chemical, and other related issues. Research studies are required to determine the levels of a chemical that may cause health effects and the levels that are not a significant health concern. More research needs to be done on the synergistic effects of multiple chemical exposures, the timing of the exposure to environmental chemicals, and the long-term cumulative effects of environmental chemicals in the body. Results of a biomonitoring program will help prioritize and foster research and public health policy on human health risks that result from exposure to environmental chemicals. The overall purpose of a biomonitoring program is to provide unique exposure information to scientists, physicians, and health officials to help prevent disease that results from exposure to environmental chemicals."

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- (b) The department shall consider, and adapt as appropriate, the analytical scientific methods utilized by the federal Centers for Disease Control and Prevention for the studies known collectively as the National-Report Reports on Human Exposure to Environmental Chemicals.
- (c) The department shall work in collaboration with the California Environmental Health Tracking Program.
- (d) Personal information, as defined in Section 1798.3 of the Civil Code, shall not be shared without the written and informed consent of the individual to whom it pertains.

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#### Article 2. The Advisory Panel

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105448. (a) The department and agency shall establish the Healthy Californians Biomonitoring Program Advisory Panel. The panel shall be composed of 16 members as follows: eight members in total. The members shall have expertise in public health, environment, epidemiology, biology, environmental

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health, occupational health, maternal and child health including
 expertise in breastfeeding, toxicology, and endocrinology.

- (1) Eight members in total, shall have expertise in public health, environment, epidemiology, and biology.
- (2) The other eight members shall include those who have expertise in the special vulnerability of children, women of childbearing age, seniors, health affected groups, breastfeeding promotion, and other communities of concern and one of these members shall be a representative from industry.
- (b) The director, the secretary, the President pro Tempore of the Senate, and the Speaker of the Assembly shall each appoint four members of the panel. Each appointing officer shall appoint two members fulfilling the qualifications of paragraph (1) of subdivision (a) and two members fulfilling the qualifications of paragraph (2) of subdivision (a), except that one of the appointments of the secretary shall be the industry representative set forth in paragraph (2) of subdivision (a).
- (b) The director and the secretary shall appoint four members each.
- (c) All members shall be appointed to the panel by July 1, 2007. Each member shall be appointed for a three-year term. Members may be reappointed for additional terms without limitation.
- (d) The panel shall meet as often as it deems necessary, with consideration of available resources, but at a minimum, twice a year.
- (e) Subcommittees of the panel reflecting the composition of the community shall be formed to advise the panel regarding community-based biomonitoring activities.
- (e) Pursuant to Sections 71110 to 71113, inclusive, of the Public Resources Code, the panel and the program shall utilize the principles of the California EPA Environmental Justice Strategy and Environmental Justice Action Plan that provide opportunities for the state to develop policies on the specific priorities of public participation and community capacity building with meaningful stakeholder input. This strategy and plan accord the highest respect and value to every individual and community, by developing and conducting public health and environmental protection programs, policies, and activities in a manner that promotes equity and affords fair treatment,

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accessibility, and protection for all Californians, regardless of race, age, culture, income, or geographic location. This strategy and plan establish the framework for integrating public participation in this program. The department may utilize models used by boards, departments, and offices at the agency for community outreach pursuant to this section.

- (f) Members of the panel—and any subcommittees shall serve without compensation, unless program funding is made available for this purpose, but shall be reimbursed for travel and other necessary expenses incurred in the performance of their duties under this chapter.
- (g) The panel shall make recommendations to the division and office regarding the design and implementation of the program, with the division and office retaining final decisionmaking authority. The panel shall review program priorities, draft protocols, study reports, outreach materials, and shall make recommendations to the secretary and the director regarding all of the following:
- (1) Chemicals that are priorities for biomonitoring in California and communities where biomonitoring will take place.
- (2) A review of how findings and reports are communicated prior to their release to participants, legislators, and the public.
- (h) The panel shall consider the criteria and recommendations generated by the department's Biomonitoring Planning Project, the California Environmental Health Tracking Network, the California Environmental Health Tracking Program, the Environmental Health Tracking Planning Consortium, and relevant peer-reviewed studies, when making recommendations.

#### Article 3. Fiscal Provisions

105453. Any funds provided, shall be deposited into the Healthy Californians Biomonitoring Fund, which is hereby established within the State Treasury, for expenditure by the department and the agency, upon appropriation by the Legislature, for purposes of this chapter. Administrative costs associated with implementing the program established pursuant to this chapter in any fiscal year shall not exceed 15 percent of the total funds deposited into the fund for that fiscal year.

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### Article 4. Reporting

- 105459. (a) By January 1, 2009, the department shall submit an interim report to the Legislature summarizing the activities of the program, including program descriptions, methodology, program outcomes, and assessment of the activities of the various biomonitoring functions conducted pursuant to this chapter. By January 1, 2010, the department shall submit a report to the Legislature regarding additional activities and recommendations for improving the program based on activities and findings to date. Every two years thereafter, in consultation with the panel, the department shall forward a report to the Legislature on the program, policy, and relevant interagency activities.
- (b) By January 1, 2010, the department shall submit a report to the Legislature regarding additional activities and recommendations for improving the program based activities and findings to date. Every two years thereafter, in consultation with the panel, the department shall forward a report to the Legislature on the program, policy, and relevant interagency activities.

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(b) The department shall provide the public access to information which they are required to release pursuant to the California Public Records Act (Chapter 3.5 (commencing with Section 6250) of Division 7 of Title 1 of the Government Code).

<del>(d)</del>

(c) The division and office shall disseminate biomonitoring findings to the general public via governmental and other Web sites in a manner that is understandable to the average person. All health and environmental exposure data shall be provided to the general public in a summary format to protect the confidentiality of program participants. Within 30 calendar days after the division releases its interim and final report to the Legislature, the reports shall be made available to the public.

36 CORRECTIONS:

37 Text – Page 9.

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